Fill in this information to identify your o	_		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known):	Chapter you are filing under: ✓ Chapter 7 ─ Chapter 11 ─ Chapter 12 ─ Chapter 13		Check if this is amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or	Susan First Name M. Middle Name	First Name Middle Name
	passport).	Moore	made rane
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8	First Name	First Name
	years	riistinaille	r iist ivairie
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>6</u> <u>9</u> <u>6</u> <u>4</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx
4.	Any business names and Employer Identification Numbers	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
	doing business as names	Business name	Business name

Del	otor 1 Case 16-32000 First Name	Doc 1 Filed 10/06/16 Entered Hoore Document Page 2	d 10/06/16 16:13:57 Desc Main of 52 ^{e number (if known)}
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
		EIN	
5.	Where you live	EIN	EIN
		49 N. Park Ave. Number Street	Number Street
		Lombard IL 60148 City State ZIP Code	City State ZIP Code
		DuPage County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
		49 N. Park Ave. Number Street	Number Street
		P.O. Box	P.O. Box
		Lombard IL 60148 City State ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longe than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
P	art 2: Tell the Court	About Your Bankruptcy Case	
7.	The chapter of the Bankruptcy Code you are choosing to file	Check one: (For a brief description of each, se for Bankruptcy (Form 2010)). Also, go to the to	ee Notice Required by 11 U.S.C. § 342(b) for Individuals Filing op of page 1 and check the appropriate box.
	under	✓ Chapter 7	
		Chapter 11	
		Chapter 12	
		Chapter 13	

Deb	tor 1 Case 16-32000	_M .Doc 1	Filed 10/06/16	Entered 10/0 Page 3 of 52°	6/16 16:13:57 e number (if known)	Desc Main
	First Name	Middle Name	DOCANINAMENT	Paye 3 01 52		
8.	How you will pay the fee	court pay w	for more details about h	now you may pay. Ty k, or money order. If	pically, if you are pa your attorney is sub	he clerk's office in your local ying the fee yourself, you may omitting your payment on your inted address.
			d to pay the fee in inst duals to Pay Your Filing	•		and attach the Application for .
		By law than fee in	w, a judge may, but is n 150% of the official pov	ot required to, waive yerty line that applies to	your fee, and may do to your family size a umust fill out the Ap	you are filing for Chapter 7. o so only if your income is less nd you are unable to pay the plication to Have the Chapter 7
9.	Have you filed for bankruptcy within the	☑ No				
	last 8 years?	Yes.				
		District _		W	Vhen	Case number
		5:			MM / DD / YYYY	
		District _		W	When MM / DD / YYYY	Case number
		District _		W	When MM / DD / YYYY	Case number
10.	Are any bankruptcy cases pending or being	☑ No				
	filed by a spouse who is	Yes.				
	not filing this case with you, or by a business	Debtor _			Relations	hip to you
	partner, or by an	District		W	Vhen	Case number,
	affiliate?				MM / DD / YYYY	if known
		Debtor _			Relations	hip to you
		District _		W	Vhen	Case number,
					MM / DD / YYYY	if known
11.	Do you rent your residence?	☐ No. ✓ Yes.	Go to line 12. Has your landlord obtaresidence?	ained an eviction judg	nment against you ar	nd do you want to stay in your
			✓ No. Go to line 12 ✓ Yes. Fill out Initia		n Eviction Judgmen	Against You (Form 101A)

and file it with this bankruptcy petition.

Deb	tor 1 Case 16-32000 First Name	M. Middle N		Filed 10/06/16 Document	Entered 10/06/16 Page 4 of 52 number	16:13:57 er (if known)	Desc Main
	Are you a sole proprietor of any full- or part-time	ny Bu ☑	No.	sses You Own as Go to Part 4.	·		
	business?		Yes.	Name and location of I	ousiness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any Number Street			
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Health Care Bus Single Asset Rea	e box to describe your busines iness (as defined in 11 U.S.C al Estate (as defined in 11 U.S defined in 11 U.S.C. § 101(53	. § 101(27A)) S.C. § 101(51B)	ZIP Code
Commodity Broker (as defined in 11 U.S.C. § 101(6) None of the above If you are filing under Chapter 11, the court must know whether you can set appropriate deadlines. If you indicate that you are a small be most recent balance sheet, statement of operations, cash-flow state or if any of these documents do not exist, follow the procedure in 11							ebtor, you must attach your federal income tax return
	debtor?	$\overline{\mathbf{A}}$	No.	I am not filing under C	•	· ·	(/ (/
	For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I am NOT a small	business debto	or according to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	eter 11 and I am a small busin	ess debtor acc	ording to the definition in the
Pa	Report If You O	wn o	r Hav	e Any Hazardous	Property or Any Prope	rty That Nee	eds Immediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	roperty that poses or is Yes. What is the hazard? Ileged to pose a threat of		What is the hazard?			
	safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed, why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property	? Number Street		

City

ZIP Code

State

Debtor 1 Case 16-32000 MDoc 1 Filed 10/06/16 Entered 10/06/16 16:13:57 Desc Main First Name Middle Name Document Page 5 of \$2000 number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not requ	iired to	receive	a brie	fing	about
credit couns					

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Г	I am not required to receive a briefing about
_	credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1	Case 16-32000		- Hacrimont	Entered 10/06/16 16:13:57 Page 6 of 52e number (if known)	Desc Main
Part 6: Answer These Questions for Reporting Purposes						
16.	What have	kind of debts do you ?			consumer debts? Consumer debts are deal primarily for a personal, family, or housely	• ()

 16. What kind of debts do you have? 16a. Are your debts primarily consumer debts? C							= ','	
		16b.				iness debts? Business debts tment or through the operation		debts that you incurred to obtain e business or investment.
		16c.	Stat	te the type of debts yo	u ow	e that are not consumer or bus	siness	s debts.
17.	Are you filing under Chapter 7?		No.	I am not filing under	Chap	oter 7. Go to line 18.		
	Do you estimate that after any exempt property is		Yes.	<u> </u>	•	•	-	xempt property is excluded and to distribute to unsecured creditors?
	excluded and administrative expenses			☑ No				
	are paid that funds will be available for distribution to unsecured creditors?			Yes				
18.	How many creditors do you estimate that you owe?		1-49 50-99 100-1 200-9	99		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.	How much do you estimate your assets to be worth?		\$50,0 \$100,	50,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much do you estimate your liabilities to be?		\$50,0 \$100,	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Pa	art 7: Sign Below							
For	you		e exa	•	d I d	eclare under penalty of perjury	that	the information provided is true
		or 1:	3 of titl		•	• • • • • • • • • • • • • • • • • • • •		f eligible, under Chapter 7, 11, 12, der each chapter, and I choose to
				•		I not pay or agree to pay some I and read the notice required		who is not an attorney to help me U.S.C. § 342(b).
		I rec	uest r	elief in accordance wit	h the	chapter of title 11, United Sta	tes C	ode, specified in this petition.
		conr	nection	•	se ca	n result in fines up to \$250,00	_	money or property by fraud in imprisonment for up to 20 years,
		X /	s/ Su	san M. Moore		x		
		5	Susan	M. Moore, Debtor 1		Signatu	ure of	Debtor 2
		E	xecut	ed on 03/17/2016		Execut	ed or	MM / DD / YYYY

Debtor 1 Case 16-32000 Doc 1 Filed 10/06/16 Entered 10/06/16 16:13:57 Desc Main First Name Middle Name Document Page 7 of \$2000 Page 10 Number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s	/ James Mc	Coy		Date	03/17/2016						
Si	gnature of Att	orney for Debtor			MM / DD / YYYY						
_	ames McCo	У									
Pr	inted name										
La	_aw Office of James McCoy										
Fii	rm Name										
10	I01 S, Addison Road										
		Street									
_											
A	ddison		IL		60101						
Ci	ty		State		ZIP Code						
Co	ontact phone	(630) 274-2424	Email address <u>r</u>	ncco	/lawr@gmail.com						
	ontact phone	(630) 274-2424	Email address <u>r</u>	ncco	/lawr@gmail.com						

				cument Page 8 of 52		
1	III in this inf	ormation to i	dentify your case	e and this filing:		
De	ebtor 1	Susan	М.	Moore		
	SDIOI I	First Name	Middle Name	Last Name		
	ebtor 2					
	pouse, if filing)	First Name	Middle Name	Last Name		
	, , , , ,					
Ur	nited States Bar	nkruptcy Court fo	r the: NORTHERN	DISTRICT OF ILLINOIS		
C	ase number					
	known)				-	if this is an
					ameno	led filing
Of	ficial Form	106A/B				
Sc	hedule A/	B: Propert	v			12/15
	Tiodaio 74	B. Troport	,			12/10
In e	ach category,	separately list a	nd describe items.	List an asset only once. If an ass	et fits in more than one ca	tegory, list
				Be as complete and accurate as p		
				ying correct information. If more	=	-
she	et to this form	. On the top of a	any additional pages	, write your name and case numb	er (if known). Answer eve	ery question.
P	art 1: De	scribe Each F	Residence, Build	ing, Land, or Other Real Es	tate You Own or Have	an Interest In
_	5		I			
1.	•		ii or equitable intere	st in any residence, building, land	i, or similar property?	
	₩ No. Go t					
	Yes. Wh	ere is the proper	ty?			
2.	Add the dolla	r value of the po	ortion you own for a	l of your entries from Part 1, inclu	uding any	**
	entries for pa	iges you have at	ttached for Part 1. V	/rite that number here		\$0.00
P	art 2: Des	scribe Your V	/ehicles			
	•		•	in any vehicles, whether they are	_	-
you	own that some	one else drives.	If you lease a vehicle	, also report it on Schedule G: Exec	cutory Contracts and Unexpi	red Leases.
_						
3.	Cars, vans, tr	ucks, tractors, s	sport utility vehicles	, motorcycles		
	□ No					
	✓ Yes					
۰.	_		AAR - L -		De col de destacación de la	D. (d
3.1.			Wno nas Check o	s an interest in the property?	Do not deduct secured claim amount of any secured claim	
Mak	ke:				Creditors Who Have Claim	
Mod	del:		سنا	tor 1 only		Current value of the
Yea	r:			tor 2 only tor 1 and Debtor 2 only	Current value of the entire property?	portion you own?
App	roximate milea	ge:	_	ast one of the debtors and another		· .
	er information:	·	П лие	ast one of the debtors and another	\$1,000.00	\$1,000.00
	9 Ford Tauru	ıe	□ Che	ck if this is community property		
133	9 Ford Taure	15		instructions)		
4.	Watercraft, ai	ircraft, motor ho	`	r recreational vehicles, other veh	icles, and accessories	
				aft, fishing vessels, snowmobiles, m		
	√ No					
	☐ Yes					
_	_				. P	
5.		-	•	I of your entries from Part 2, inclu		\$1,000.00
	entries for pa	iyes you nave at	uached for Part 2. V	Irite that number here	7	+ 1,555.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Debte		Case 16-32000 Susan	M.	Filed 10/06/16 Downent	Entered 10/06/16 16:13:57 Page 9 of 52se number (if known)	Desc Main
5 .	Hous	First Name ehold goods and fur	Middle Name nishings	Last Name		
		nples: Major appliance	es, furniture, liner	ns, china, kitchenware		
	_		ual household	goods and furnishir	ngs	\$2,000.00
		•		_	equipment; computers, printers, scanners; es, cameras, media players, games	
	☐ Y	lo 'es. Describe				
					x; books, pictures, or other art objects; ns, memorabilia, collectibles	
		lo 'es. Describe				
			aphic, exercise,	and other hobby equipmols; musical instrument	nent; bicycles, pool tables, golf clubs, skis; s	
		lo ′es. Describe				
	Firea Exan		hotguns, ammun	ition, and related equip	nent	
		lo 'es. Describe				
	Cloth Exan		es, furs, leather c	oats, designer wear, sh	oes, accessories	
	☑ Y	lo 'es. Describe us t	ual wearing ap	parel		\$1,000.00
	Jewe Exan	•	ry, costume jewe	Iry, engagement rings, v	vedding rings, heirloom jewelry, watches, ge	ems,
		lo 'es. Describe				
-		farm animals nples: Dogs, cats, bird	ls, horses			
	☑ Y	lo 'es. Describe				
	-	other personal and he	ousehold items	you did not already lis	t, including any health aids you	
	□ Y	lo Yes. Give specific Information				
			-		any entries for pages you have	→ \$3,000.00
Pa	rt 4:	Describe You	ır Financial A	ssets		

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

	Case 10-32000 Doc't Filed 10/00/10 Efficied 10/00/10 10.13.57 Desc Mail	1
Deb	tor 1 Susan M. Doc Page 10 of 22 number (if known) First Name Middle Name Last Name	
	First Name Middle Name Last Name	
16.	Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	□ No	
	▽ Yes Cash:	\$150.00
		_
17.	Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.	
	□ No ☑ Yes Institution name:	
	17.1. Other financial account: Checking account at BMO Harris	\$300.00
4.0		\$300.00
18.	Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts	
	✓ No Yes Institution or issuer name:	
19.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture	
	✓ No ☐ Yes. Give specific	
	information about	
	them	
20.	Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.	
	☑ No	
	Yes. Give specific	
	information about	
	them Issuer name:	
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	□ No	
	Yes. List each	
	account separately. Type of account: Institution name:	
	Additional account: Pension from Elmhurst Memorial Hospital	Unknown
		Olikilowii
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others	
	✓ No ☐ Yes	
23	Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)	
_0.	No	
	Yes Issuer name and description:	
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	
	☑ No	
	Yes	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit	
	✓ No Yes. Give specific information about them	

Case 16-32000 Filed 10/06/16 Entered 10/06/16 16:13:57 Desc Main Doc 1 Dodwinent Page 11 of (52e number (if known) Debtor 1 Middle Name 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property; Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **☑** No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Yes. Give specific information about them Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you **☑** No ☐ Yes. Give specific information \$0.00 Federal: about them, including whether \$0.00 State: you already filed the returns and the tax years..... \$0.00 Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement **☑** No ☐ Yes. Give specific information Alimony: \$0.00 \$0.00 Maintenance: Support: \$0.00 Divorce settlement: \$0.00 \$0.00 Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else **№** No ☐ Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance **☑** No Yes. Name the insurance company of each policy and list its value..... Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died **☑** No ☐ Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue **☑** No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **☑** No Yes. Describe each claim......

Debt	tor 1	Case 16-32000 Susan First Name	DOC 1 M. Middle Name	Filed 10/06/16 Dodwonent Last Name	Entered 10/06/16 16:13:57 Page 12 ofc52 number (if known)	
35.	Anv	financial assets you di				
,	$\overline{\mathbf{V}}$	-				
86.	_			s from Part 4. including	g any entries for pages you have	
					, any common ter pages year mare	\$450.00
Pa	art 5	Describe Any Bu	ısiness-Rel	lated Property You	Own or Have an Interest In. List a	nny real estate in Part 1.
		you own or have any leg				,
	V	No. Go to Part 6.				
		Yes. Go to line 38.				
88.	Acc	ounts receivable or con	nmissions yo	u already earned		Current value of the portion you own? Do not deduct secured claims or exemptions.
		No		·		
	<u> </u>	Yes. Describe				
9.		ce equipment, furnishin mples: Business-related desks, chairs, ele	computers, so	oftware, modems, printe	rs, copiers, fax machines, rugs, telephones,	
		No Yes. Describe				
0.	Mac	chinery, fixtures, equipn	nent, supplies	s you use in business,	and tools of your trade	
		No Yes. Describe				
11.	Inve	entory				
	☑	No Yes. Describe				
2.	Inte	rests in partnerships or	joint venture	es		
	$\overline{\checkmark}$					
	_	Yes. Describe Name			% of ownership	D:
3.		tomer lists, mailing lists	s, or other co	mpilations		
				y identifiable informati	on (as defined in 11 U.S.C. § 101(41A))?	
4.	Any	business-related prope	erty you did n	ot already list		
		No Yes. Give specific inform	nation.	·		
5.	Add	I the dollar value of all o	of your entries		g any entries for pages you have	\$0.00
Pa	art 6	•		ommercial Fishing in farmland, list it ir	Related Property You Own or Haven Part 1.	e an Interest In.
6.	Do	you own or have any leg	gal or equitab	le interest in any farm	- or commercial fishing-related property?	
	☑	No. Go to Part 7. Yes. Go to line 47.	- ·	·	2 ,	

Case 16-32000 Doc 1 Filed 10/06/16 Entered 10/06/16 16:13:57 Desc Main Page 13 ofc52e number (if known) Doc**wane**nt Debtor 1 Middle Name Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish **☑** No Yes.... 48. Crops--either growing or harvested **☑** No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Yes.... 50. Farm and fishing supplies, chemicals, and feed **☑** No ☐ Yes.... 51. Any farm- and commercial fishing-related property you did not already list **☑** No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have \$0.00 attached for Part 6. Write that number here..... Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **☑** No ☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here.....

\$0.00

Debtor 1 Susan M. Dodwingent Page 14 Of Case number (if known)

First Name

Middle Name

Р	art 8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2		→		\$0.00
56.	Part 2: Total vehicles, line 5	\$1,000.00			
57.	Part 3: Total personal and household items, line 15	\$3,000.00			
58.	Part 4: Total financial assets, line 36	\$450.00			
59.	Part 5: Total business-related property, line 45	\$0.00			
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7: Total other property not listed, line 54	+ \$0.00			
62.	Total personal property. Add lines 56 through 61	\$4,450.00	Copy personal property total	+	\$4,450.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$4,450.00

Fill in this information to identify your case:						
Debtor 1	Susan	М.	Moore			
İ	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						
Case number	Case number					
(if known)						

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	Claim as	Exemp
---------	----------	---------	-----------	----------	-------

ш	identify the Property You Cla	ım as Exempt					
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Check only one box for each exemption				
199	of description 99 Ford Taurus e from Schedule A/B:	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)			
usı	of description ual household goods and furnishings e from Schedule A/B:6	\$2,000.00	\$2,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)			
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 your No Yes. Did you acquire the property covered No Yes	ears after that for cas	ses filed on or after the date	,			

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Debtor 1

Susan

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Case number (if known)

First Name Middle Name Last Name

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description usual wearing apparel Line from <i>Schedule A/B</i> :11	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
Brief description Cash on hand Line from Schedule A/B:16	\$150.00	\$150.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description Checking account at BMO Harris Line from Schedule A/B:	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description Pension from Elmhurst Memorial Hospital Line from Schedule A/B:21	Unknown	\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-704

Fill in this info	ormation to i	identify your case	:	
Debtor 1	Susan First Name	M. Middle Name	Moore Last Name	
Debtor 2	i iist ivairie	Middle Name	Lastivaine	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A

Amount of claim

Do not deduct the value of collateral

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

Fill in this info	Fill in this information to identify your case:						
Debtor 1	Susan First Name	M. Middle Name	Moore Last Name				
Debtor 2							
· · · · · · · · · · · · · · · · · · ·	(Spouse, if filing) First Name Middle Name Last Name						
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS							
Case number (if known)							

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1.	Do any credito	rs have priority	unsecured	claims against	you?
----	----------------	------------------	-----------	----------------	------

No. Go to Part 2.

Yes.

claim, list the other creditors in Part 3.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim Priority Nonpriority amount amount

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Debtor 1

Μ. First Name Middle Name Last Name

Part 2:	List All of Your NONPRIORITY Unsecured Claims	s

Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with you other schedules.

√ Yes		
If a creditor has more than one nonpriority unsetype of claim it is. Do not list claims already inc	s in the alphabetical order of the creditor who holds each claim. ecured claim, list the creditor separately for each claim. For each claim listed, identify cluded in Part 1. If more than one creditor holds a particular claim, list the other creditor unsecured claims, fill out the Continuation Page of Part 2.	
	I Otal	Ciaiiii
4.1	\$2	2,087.00
Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number 0 0 6 2	
P.o. Box 8803	When was the debt incurred? 04/2007	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ U	
	Disputed	
Wilmington DE 19899 City State ZIP Code	Type of NONDRIORITY upgeoured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	ordan dara	
☑ No		
Yes		
4.2		\$168.91
L Brylan Home	Last 4 digits of account number	<u>\$100.31</u>
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 659728 Number Street	As of the date you file, the claim is: Check all that apply.	
Circuit Circuit	_ ☐ Contingent	
	Unliquidated	
San Antonijo TX 78265	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☐ Debts to person or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Non-Purchase Money	
Is the claim subject to offset?		
☑ No □ Yes		
Yes		

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Debtor 1

Susan

Μ.

Document

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Case number (if known)

Middle Name Last Name First Name

Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$910.00
Capital One Bank Usa N	Last 4 digits of account number 7 3 0 8	Ψο τοισο
Nonpriority Creditor's Name	When was the debt incurred? 02/2005	
Pob 30281 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Salt Lake City UT 84130	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
Yes		
4.4		\$752.00
Capital One Bank Usa N	Last 4 digits of account number 5 3 6 7	
Nonpriority Creditor's Name	When was the debt incurred? 08/2004	
Pob 30281 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Salt Lake City UT 84130	□ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		
Yes		
4.5		\$553.00
Capital One Bank Usa N	Last 4 digits of account number 8 7 5 2	
Nonpriority Creditor's Name Pob 30281	When was the debt incurred? 02/2006	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Salt Lake City UT 84130	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No ☐ Yes		
Yes		

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Debtor 1

Susan

Μ.

Middle Name First Name Last Name

Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
4.6		\$377.03
Carson Pirie Scott	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 659813	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
San Antonio TX 78265		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Credit Card	
✓ No		
Yes		
4.7		* 000 00
	Last 4 digits of account number 1 6 9 8	\$632.00
Comenity Bank/carsons Nonpriority Creditor's Name	Last 4 digits of account number 1 6 9 8 When was the debt incurred? 07/2012	
3100 Easton Square PI Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Columbus OH 43219	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
✓ Debtor 1 only✓ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
☑ No □ Yes		
4.8		\$3,063.00
Discover Fin Svcs Llc	Last 4 digits of account number 7 1 2 6	
Nonpriority Creditor's Name Pob 15316	When was the debt incurred? 12/2000	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	☐ Unilquidated ☐ Disputed	
Wilmington DE 19850 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
ப Is the claim subject to offset?		
☑ No		
Yes		

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Debtor 1

Susan

Μ.

Last Name First Name Middle Name

Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number then previous page.	m sequentially from the	Total claim
4.9		\$492.24
HSN	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 659707	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	Unliquidated	
San Antonio TX 78265	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Non-Purchase Money	
Is the claim subject to offset?		
☑ No □ Yes		
Yes		
4.10		\$2,637.93
I.C. Bonnyo	Last 4 digits of account number	Ψ2,037.33
J.C. Pennys Nonpriority Creditor's Name		
P.O. Box 960090	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	□ Disputed	
Orlando FL 32896	_	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
·		
4.11		\$301.81
Jared	_ Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 740425	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Cincinnati OH 45274	□ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
—	☑ Other. Specify	
Check if this claim is for a community debt	Non-Purchase Money	
Is the claim subject to offset?		
☑ No □ Yes		
Yes		

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Debtor 1

Susan

Μ.

Middle Name First Name

Last Name

Part 2: Your NONPRIORITY Unsecure	ed Claims Continuation Page	
After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
4.12		\$374.00
Jared-galleria Of Jwlr	Last 4 digits of account number 0 4 9 1	
Nonpriority Creditor's Name 375 Ghent Rd.	When was the debt incurred? 05/2012	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Akron OH 44333 Citv State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Charge Account	
Is the claim subject to offset?	5 go /	
☑ No		
Yes		
4.13		\$1,594.45
Juniper Card Services	Last 4 digits of account number 0 0 6 2	
Nonpriority Creditor's Name	When was the debt incurred?	
p.o. Box 6017 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
City of Industry CA 91716		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	☑ Other. Specify Credit Card	
Is the claim subject to offset?	Orealt Gala	
✓ No ☐ Yes		
Yes		
4.14		\$0.00
LJ Juniper Card Services	Last 4 digits of account number	Ψ0.00
Nonpriority Creditor's Name	When was the debt incurred?	
p.o. Box 6017 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
City of Industry CA 91716		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Siguit Gai u	
✓ No		
Yes		

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Debtor 1

Susan

Μ.

Document

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Case number (if known)

Middle Name First Name Last Name

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		\$0.00
Juniper Card Services	Last 4 digits of account number	Ψ0.00
Nonpriority Creditor's Name	When was the debt incurred?	
p.o. Box 6017 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
City of Industry CA 91716	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? No		
☑ No ☐ Yes		
4.16		¢2.014.00
Kohls/capone	Last 4 digits of account number 7 4 0 6	\$3,014.00
Nonpriority Creditor's Name	Last 4 digits of account number 7 4 0 6 When was the debt incurred? 05/2007	
N56 W 17000 Ridgewood Dr Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
Menomonee Falls WI 53051	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.17		\$538.09
Romans	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 659728	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Disputed	
San Antonio TX 78265 City State ZIP Code	Type of NONDPIODITY unsecured elem-	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No		
Yes		

Case 16-32000 Doc 1

Debtor 1

Susan First Name Μ.

Middle Name

Last Name

Page 25 of 52
Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
4.18 Syncb/jcp Nonpriority Creditor's Name	Last 4 digits of account number 2 2 1 6	\$3,196.00
Po Box 965007 Number Street	When was the debt incurred? 11/2005 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Orlando City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Charge Account	
4.19 Syncb/sams Club	Last 4 digits of account number 8 0 7 9	\$1,846.00
Nonpriority Creditor's Name Po Box 965005 Number Street	When was the debt incurred? 09/2005 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Orlando FL 32896 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Charge Account	
Yes 4.20		\$4,900.00
Syncb/walmart Nonpriority Creditor's Name Po Box 965024 Number Street	Last 4 digits of account number 2 6 7 7 When was the debt incurred? 07/2006 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Orlando FL 32896 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Charge Account	

Filed 10/06/16 Entered 10/06/16 16:13:57 Desc Main Document Page 26 of 52 Case number (if known) Case 16-32000 Doc 1

Debtor 1

Susan

Μ.

Middle Name First Name Last Name

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.21		\$657.00
Woman Within	Last 4 digits of account number <u>5</u> _ <u>4</u> _ <u>5</u> _ <u>3</u>	
Nonpriority Creditor's Name P.O. Box 65972	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
San Antonio TX 78265	Disputed	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Non-Purchase Money	
4.22		\$0.00
Woman Within	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 659728	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
San Antonia TV 70265	☐ Contingent☐ Unliquidated☐ Disputed	
San Antonio TX 78265 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Non-Purchase Money	
Is the claim subject to offset? ☑ No ☐ Yes		

Entered 10/06/16 16:13:57 Case 16-32000 Doc 1 Filed 10/06/16

Debtor 1

Μ. Susan First Name Middle Name Page 27 of 52 Case number (if known)

Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} ⊀	\$28,094.46
	6j.	Total. Add lines 6f through 6i.	6j.	\$28,094.46

Fill in this information to identify your case:				
Debtor 1	Susan First Name	M. Middle Name	Moore Last Name	
Debtor 2	1 list ivallie	Middle Name	Lastiname	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINO	IS
Case number (if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1.	. Do you have any executory contracts or unexpired leases?		
	No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.		
	Yes Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B)		

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Susan	М.	Moore	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS	_
Case number				☐ Che
(if known)				ame

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) ☑ No ☐ Yes
2.	Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
3.	☐ Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

			Docu	ment Pag	e 30 c	of 52		
F	ill in this inform	ation to identify	your case:					
	Debtor 1	Susan	М.	Moore				
		First Name	Middle Name	Last Name			Che	ck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				An amended filing
					LINOIS			A supplement showing postpetition
	United States Bankro Case number	uptcy Court for the:	NORTHERN	DISTRICT OF IL	LINUIS	<u> </u>		chapter 13 income as of the following date:
	(if known)				_			MM / DD / YYYY
	∰::'-! Б 40	01				_		WWW.7 DD 7 TTTT
_	fficial Form 10							
50	chedule I: You	ur income						12/15
res inc abo you	sponsible for supply clude information ab out your spouse. If ur name and case n	ring correct information your spouse. It more space is need	ation. If you are f you are separ ded, attach a se Answer every o	e married and not rated and your spo eparate sheet to th	filing joi ouse is r	intly, and y not filing w	our :	Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
1.	Fill in your employinformation.	yment						
	If you have more the	nan one		Debtor 1				Debtor 2 or non-filing spouse
	job, attach a separ	ate page Emplo	yment status	☐ Employed	I			Employed
	with information ab additional employe	rs.		✓ Not employ	ea			■ Not employed
	Include port time.	Occup	ation	Unemployed				
	Include part-time, s or self-employed w		yer's name					
	Occupation may in	clude Emplo	yer's address					
	student or homema	aker, if it	, 0. 0	Number Street				Number Street
	арроо.			-				
								- <u> </u>
				City	St	tate Zip Co	de	City State Zip Code
		How Io	ng employed tl	here?				
F	Part 2: Give D	etails About Mo	nthly Incom	е				
	timate monthly inco		ou file this form	n. If you have noth	ning to re	port for any	/ line	, write \$0 in the space. Include your
If y	ou or your non-filing	spouse have more t		er, combine the inf	ormation	for all emp	loyeı	rs for that person on the lines below. If
you	u need more space, a	attach a separate sh	eet to this form.					
					F	or Debtor	1	For Debtor 2 or non-filing spouse
2.	List monthly gros payroll deductions) would be.	s wages, salary, ar i. If not paid monthly	nd commissions v, calculate what	s (before all the monthly wage	2.	\$0	.00	
3.	Estimate and list	monthly overtime p	ay.		3. +	\$0	.00	
4.	Calculate gross in	ncome. Add line 2	Lling 3		4.	¢n	.00	
₹.	Calculate gross II	Aud line 2	1 III IC J.		4.	Ψ	.00	

Debtor 1 Susan First Name Μ.

Middle Name

Document

Last Name

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Case number (if known)

			For Debtor 1	For Debto non-filing		
	Copy line 4 here	→ 4.	\$0.00			
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	\$0.00			
	5f. Domestic support obligations	5f.	\$0.00			
	5g. Union dues	5g.	\$0.00			
	5h. Other deductions.	og.				
	Specify:	5h. -	\$0.00			
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	+ 6.	\$0.00			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4	1. 7.	\$0.00			
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$0.00	-		
	8f. Other government assistance that you regularly receive			-		
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00			
	8g. Pension or retirement income	— 8g.	\$582.49			
	8h. Other monthly income.	8h.				
	Specify:	011.4	- \$0.00			
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h	n. 9.	\$582.49			
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$582.49	+]=	\$582.49
11.	State all other regular contributions to the expenses that you list in Include contributions from an unmarried partner, members of your hous friends or relatives. Do not include any amounts already included in lines 2-10 or amounts to	ehold, y	our dependents, you		•	
	Specify:		or available to pay	cpo//000 i/di	11.	#0.00
	. ,					
12.	Add the amount in the last column of line 10 to the amount in line 1 income. Write that amount on the Summary of Your Assets and Liabilit if it applies.				12.	\$582.49 Combined
12	Do you expect an increase or decrease within the year after you file	a this fo	rm?			monthly income
٠.		C 1113 10				
	No.✓ Yes. Explain:I am looking for employment.					

Fi	II in this inform	nation to identi	fy your case:			Chr	eck if this	s ic:	
	Debtor 1	Susan	М.	Moore	e			ended filing	
		First Name	Middle Name	Last Na	me	╽╏	A supp	lement showing	
	Debtor 2						•	r 13 expenses a ng date:	s of the
((Spouse, if filing)	First Name	Middle Name	Last Na			TOHOWH	ig date.	
	Jnited States Bankı	ruptcy Court for the	NORTHERN DIS	STRICT OF	FILLINOIS		MM / D	DD / YYYY	_
	Case number (if known)								
Of	ficial Form 10	ne i				_			
	ficial Form 10 hedule J: Yo		e						12/15
Ве	as complete and a	ccurate as possib	le. If two married pe	-		-	-		pplying
		•	eded, attach anothe wer every question.	r sheet to t	his form. On the top	o of a	ny addit	ional pages, wri	ite your
P	art 1: Descri	ibe Your House	ehold						
1.	Is this a joint cas	e?							
	_ No	Debtor 2 live in a se	eparate household?	2. Expense	s for Separate House	hold a	f Debtor	2.	
2.	Do you have dep		No	_,/pooo.	orer Coparate Frede		. 2 00101		
_	Do not list Debtor 1 and Debtor 2.		Yes. Fill out this information for each dependent		Dependent's relationship t Debtor 1 or Debtor 2		p to	age live with	
	Do not state the de	ependents'							No Yes
	names.								Yes
									□ No - □ Yes
									□ No
									Yes
									No No
3.	Do your expense expenses of peop	ole other than	✓ No ☐ Yes						Yes Yes
	yourself and you	r aepenaents?							
P	art 2: Estima	ate Your Ongoi	ng Monthly Expe	enses					
to r		of a date after the	kruptcy filing date ur bankruptcy is filed.	-	-			•	
Incl	ude expenses paid	d for with non-cas	h government assist n Schedule I: Your In	-				Your expens	es
4.			enses for your reside any rent for the groun					4.	\$500.00
	If not included in	line 4:							
	4a. Real estate ta	axes						4a	
	4b. Property, hor	neowner's, or rente	r's insurance					4b	
	4c. Home mainte	enance, repair, and	upkeep expenses					4c	

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Susan

First Name

Middle Name

Document

Last Name

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Case number (if known)

Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$50.00 6b. Water, sewer, garbage collection 6b Telephone, cell phone, Internet, satellite, and 6c. \$130.00 cable services 6d. 6d. Other. Specify: Food and housekeeping supplies 7. \$200.00 Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. 10. Personal care products and services 10. 11. Medical and dental expenses 11. \$10.00 12. Transportation. Include gas, maintenance, bus or train 12. fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. magazines, and books 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. Health insurance 15b. 15b. \$56.00 Vehicle insurance 15c. 15d. Other insurance. Specify: 15d. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Taxes. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. 17c. Other. Specify: 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. 19. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. 20b. Real estate taxes 20h 20c. Property, homeowner's, or renter's insurance 20c. 20d. Maintenance, repair, and upkeep expenses 20d. 20e. Homeowner's association or condominium dues 20e.

		Case 16-32000	DOC T	Filea 10/00/10	Fureled 10/06	0/10 10:13.57	Desc Main
Deb	otor 1	Susan	М.	Document Moore	Page 34 of 52	Case number (if know	wn)
		First Name	Middle Name	Last Name		0000 110.11001 (1	
21.	Othe	er. Specify:				21.	+
22.	Calc	ulate your monthly exp	enses.				
	22a.	Add lines 4 through 21	i.			22a.	\$946.00
	22b.	Copy line 22 (monthly	expenses for I	Debtor 2), if any, from C	Official Form 106J-2.	22b.	
	22c.	Add line 22a and 22b.	The result is y	your monthly expenses.		22c.	\$946.00
23.	Calc	culate your monthly net	income.				
	23a.	Copy line 12 (your con	nbined monthly	y income) from Schedul	e I.	23a.	<u>\$582.49</u>
	23b.	Copy your monthly exp	penses from lir	ne 22c above.		23b.	\$946.00
	23c.	Subtract your monthly The result is your monthly		,		23c.	(\$363.51)
24.	Do y	ou expect an increase	or decrease i	n your expenses withi	n the year after you fil	le this form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?						
	$\overline{\mathbf{A}}$	No.					
		Yes. Explain here:					
	_	None.					

Fill	in this inf	ormation to	identify your case	:	<i>5</i> 2	
Debt	or 1	Susan	М.	Moore		
5.1.		First Name	Middle Name	Last Name		
Debt (Spo	or 2 use, if filing)	First Name	Middle Name	Last Name	—	
Unite	ed States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		
	e number				☐ Check	if this is an
(if kn	iown)					ed filing
Offic	ial Form	106Sum				
Sum	nmary of	Your Ass	ets and Liabilit	ies and Certain S	Statistical Information	12/15
correc	et information ules after ye	on. Fill out all o	f your schedules first; jinal forms, you must f	then complete the inform	ner, both are equally responsible for the stion on this form. If you are filing the check the box at the top of this	g amended
						Your assets Value of what you own
1. S	Schedule A/B	: Property (Offic	ial Form 106A/B)			#0.00
1:	a. Copy line	e 55, Total real e	estate, from Schedule A	/B		\$0.00
11	b. Copy line	e 62, Total perso	onal property, from Sche	dule A/B		\$4,450.00
1	c. Copy line	e 63, Total of all	property on Schedule A	/B		\$4,450.00
Part	t 2: Su	mmarize You	ur Liabilities			
						Your liabilities Amount you owe
				Property (Official Form 106 f claim, at the bottom of the	6D) last page of Part 1 of Schedule D	\$0.00
				s (Official Form 106E/F) ured claims) from line 6e of	Schedule E/F	\$0.00
31	b. Copy the	total claims fron	m Part 2 (nonpriority uns	secured claims) from line 6j	of Schedule E/F	+\$28,094.46
					Your total liabilities	\$28,094.46
Part	t 3: Su	mmarize You	ur Income and Exp	enses		
		our Income (Offi		Schedule I		\$582.49
5 . S	Schedule J: Y	our Expenses (Official Form 106J)			

Copy your monthly expenses from line 22c of Schedule J.....

\$946.00

Debtor 1 Susan M. Doctorent Page 36 of a number (if known)
First Name Middle Name Last Name

Part 4: Answer These Questions for Administrative and Statistical Records

6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?					
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes					
7.	What kind of debt do you have?					
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.					
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.					
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.					
_						

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$0.00

Case	10-32000		ument Page 37 of	.0/00/10 10.13.3 <i>1</i> .52	Desc Main
Fill in this inf	ormation to	identify your case	et e		
Debtor 1	Susan	М.	Moore	.]	
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court fo	or the: NORTHERN [DISTRICT OF ILLINOIS	-	
Case number					Check if this is an
(if known)				_	amended filing
				_	
Official Form	106Dec				
Declaration	About an	Individual Deb	tor's Schedules		
If two married nec	onle are filing to	gother, both are equa	lly responsible for supplying	correct information	

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

otice, n 119).

12/15

			Doci	iment Page	38 of ¹	52		
Fi	ll in this in	formation to	identify your case	:				
De	btor 1	Susan	М.	Moore				
		First Name	Middle Name	Last Name				
	ebtor 2 pouse, if filing) First Name	Middle Name	Last Name				
Un	ited States Ba	ankruptcy Court f	or the: NORTHERN D	ISTRICT OF ILLIN	OIS			
	se number known)	_				—	eck if this is an ended filing	
	icial Forn		I Affairs for Ind	ividuals Filin	n for R	ankruntov		12/15
you	r name and c	ase number (if k	ce is needed, attach a something in the second seco	question.		n the top of any additiona ved Before	ai payes, write	
1.	What is you ☐ Married ☑ Not marr	r current marital	status?					
2.	☑ No	•	e you lived anywhere of you lived in the last 3 you	-				
3.	(Community		•			ommunity property state on a, Nevada, New Mexico, F	•	
	▼ No Yes. Ma	ke sure you fill o	ut Schedule H: Your Co	debtors (Official Form	n 106H).			
Pa	art 2: Ex	plain the Sou	urces of Your Inco	me				
4.	Fill in the total	al amount of inco	om employment or from me you received from a d you have income that	Il jobs and all busines	ses, includ	0.	ious calendar years	;?
	✓ No ☐ Yes. Fill	in the details.						

Deb	tor 1	Susan	М.	Do ownae nt	Page 39 ofc52 number (if known)		
	F	First Name	Middle Name	Last Name	-		
5.	5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalt and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.						
	☑ No	source ar	•	each source separat	ely. Do not include income that you listed in line 4.		
P	art 3:			Made Before Y	ou Filed for Bankruptcy		
6.	Are eithe	er Debtor	1's or Debtor 2's debts p	rimarily consumer	debts?		
	□ No.			•	ner debts. Consumer debts are defined in 11 U.S.C. § 101(8) as ly, or household purpose."		
		During t	he 90 days before you file	d for bankruptcy, did	you pay any creditor a total of \$6,225* or more?		
		□ No.	Go to line 7.				
		Yes.	total amount you paid that	at creditor. Do not in	otal of \$6,225* or more in one or more payments and the clude payments for domestic support obligations, such as de payments to an attorney for this bankruptcy case.		
		* Subjec	ct to adjustment on 4/01/16	and every 3 years a	after that for cases filed on or after the date of adjustment.		
	✓ Yes.	Debtor	1 or Debtor 2 or both hav	e primarily consum	ner debts.		
		During t	he 90 days before you file	d for bankruptcy, did	you pay any creditor a total of \$600 or more?		
		✓ No.	Go to line 7.				
		☐ Yes.		payments for domes	otal of \$600 or more and the total amount you paid that tic support obligations, such as child support and alimony. for this bankruptcy case.		
7.	Insiders is corporation agent, industrial such as of	include yo ons of whi cluding on child supp	ur relatives; any general p ch you are an officer, dired e for a business you opera ort and alimony.	artners; relatives of a ctor, person in contro	payment on a debt you owed anyone who was an insider? any general partners; partnerships of which you are a general partner; ol, or owner of 20% or more of their voting securities; and any managing for. 11 U.S.C. § 101. Include payments for domestic support obligations		
	Yes.	List all pa	ayments to an insider.				

Deb	otor 1	Susar		Doc 1 M .	Filed 10/06/16 Dodwonent	Entered 10/06/16 16:13:57 Page 40 of 52 number (if known)	Desc Main
0	\A/;+L	First Na		Middle Name	Last Name	u novemente er transfer env preparty en ee	accust of a daht that
8.		efited an ir		u ioi balikiu	oicy, did you make an	y payments or transfer any property on ac	count of a dept that
	Inclu	ıde paymer	nts on debts gu	uaranteed or c	osigned by an insider.		
		No Yes. List a	II payments the	at benefited a	n insider.		
Pa	art 4	Iden	tify Legal A	Actions, Re	possessions, and	Foreclosures	
9.	List	all such ma	-	g personal inju		in any lawsuit, court action, or administra actions, divorces, collection suits, paternity a	· •
	ب	No Yes. Fill in	the details.				
10.	seiz	ed, or levi	-			property repossessed, foreclosed, garnisl	hed, attached,
		No. Go to Yes. Fill in	line 11. the informatio	n below.			
11.		-	-			r, including a bank or financial institution, ause you owed a debt?	set off any
		No Yes. Fill in	the details.				
12.		-	-		otcy, was any of your ustodian, or another c	property in the possession of an assignee official?	e for the benefit of
		No Yes					
Pa	art 5	List	Certain Gif	ts and Cor	ntributions		
13.	With	in 2 years	before you fil	led for bankrı	uptcy, did you give an	y gifts with a total value of more than \$600	per person?
	بنا	No Yes. Fill in	the details for	each gift.			
14.		nin 2 years ny charity?	-	led for bankrı	uptcy, did you give an	y gifts or contributions with a total value o	of more than \$600
	سنا	No Yes. Fill in	the details for	each gift or c	ontribution.		
Pa	art 6	List	Certain Lo	sses			
15.		-	pefore you file or gambling?		otcy or since you filed	for bankruptcy, did you lose anything bed	cause of theft, fire,
	ے	No Yes. Fill in	the details.				

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Debtor 1

Susan

M.

Doownent

First Name

Middle Name

Last Name

Page 41 ofc52e number (if known)

Part 7:	List Certain Payments or Transfers

6.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?
	Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.
	✓ No Yes. Fill in the details.
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.
	No Yes. Fill in the details.
8.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
	Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.
	✓ No Yes. Fill in the details.
9.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)
	✓ No Yes. Fill in the details.
Pa	List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.
	✓ No ☐ Yes. Fill in the details.
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?
	✓ No ☐ Yes. Fill in the details.
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No
	Yes. Fill in the details.

Filed 10/06/16 Entered 10/06/16 16:13:57 Desc Main Case 16-32000 Doc 1 Page 42 of 252 number (if known) Debtor 1 Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **☑** No ☐ Yes. Fill in the details. **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **⋈** No Yes. Fill in the details. 25. Have you notified any governmental unit of any release of hazardous material? **☑** No ☐ Yes. Fill in the details. 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **V** No ☐ Yes. Fill in the details. Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.

Debtor 1	Case 16-32000 Susan First Name	_	ed 10/06/16 <u>odvlønænt</u> _{Last Name}	Entered 10/06/16 16:13:57 Page 43 ofc52 number (if known)						
	28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.									
	No Yes. Fill in the details be	·low.								
Part '	2: Sign Below									
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.										
	n M. Moore n M. Moore, Debtor 1		Signature	of Debtor 2						
Date	03/17/2016		Date							
Did you	Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?									
☑ No □ Yes										
Did you	pay or agree to pay som	neone who is not a	n attorney to hel	p you fill out bankruptcy forms?						
☑ No										
Yes	Name of person				otcy Petition Preparer's Notice, gnature (Official Form 119).					

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X	/s/ Susan M. Moore					
	Susan M. Moore, Debtor 1					

Signature of Debtor 2

Date 03/17/2016 MM / DD / YYYY Date _

MM / DD / YYYY

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

In re	Susan M. Moore	Case No.		
		Chapter	7	
	DISCLOSURE OF COMPENSATION OF	ATTORNEY FOR	R DEBTOR	
th: se	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify the at compensation paid to me within one year before the filing of the pervices rendered or to be rendered on behalf of the debtor(s) in contrast follows:	etition in bankruptcy, or	agreed to be paid to me, for	
Fo	or legal services, I have agreed to accept	<u> </u>	\$800.00	
Pr	rior to the filing of this statement I have received		\$800.00	
Ва	alance Due		\$0.00	
2. Th	ne source of the compensation paid to me was: ☐ Other (specify)			
3. Th	ne source of compensation to be paid to me is:			
	☑ Debtor ☐ Other (specify)			
4. 	I have not agreed to share the above-disclosed compensation wit associates of my law firm.	th any other person unle	ess they are members and	
	I have agreed to share the above-disclosed compensation with a associates of my law firm. A copy of the agreement, together with compensation, is attached.			
5. In	return for the above-disclosed fee, I have agreed to render legal se	rvice for all aspects of th	ne bankruptcy case, including:	
	Analysis of the debtor's financial situation, and rendering advice to ankruptcy;	the debtor in determinin	g whether to file a petition in	
b.	Preparation and filing of any petition, schedules, statements of affa	airs and plan which may	be required;	
C.	Representation of the debtor at the meeting of creditors and confirm	mation hearing, and any	adjourned hearings thereof;	

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

 03/17/2016
 /s/ James McCoy
 Bar No.

 Date
 James McCoy
 Bar No.

Law Office of James McCoy 101 S, Addison Road Addison, IL 60101

Phone: (630) 274-2424 / Fax: (630) 279-2425

/s/ Susan M. Moore

Susan M. Moore

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Susan M. Moore CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

	The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/he	r
knov	edge.	

Date <u>3/17/2016</u>	Signature /s/ Susan M. Moore Susan M. Moore
Date	Signature

Barclays Bank Delaware P.o. Box 8803 Wilmington, DE 19899

Brylan Home P.O. Box 659728 San Antoniio, TX 78265

Capital One Bank Usa N Pob 30281 Salt Lake City, UT 84130

Carson Pirie Scott P.O. Box 659813 San Antonio, TX 78265

Comenity Bank/carsons 3100 Easton Square Pl Columbus, OH 43219

Discover Fin Svcs Llc Pob 15316 Wilmington, DE 19850

HSN P.O. Box 659707 San Antonio, TX 78265

J.C. Pennys P.O. Box 960090 Orlando, FL 32896

Jared
P.O. Box 740425
Cincinnati, OH 45274

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Jared-galleria Of Jwlr 375 Ghent Rd. Akron, OH 44333

Juniper Card Services p.o. Box 6017 City of Industry, CA 91716

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Romans P.O. Box 659728 San Antonio, TX 78265

Syncb/jcp Po Box 965007 Orlando, FL 32896

Syncb/sams Club Po Box 965005 Orlando, FL 32896

Syncb/walmart Po Box 965024 Orlando, FL 32896

Woman Within P.O. Box 65972 San Antonio, TX 78265

Woman Within
P.O. Box 659728
San Antonio, TX 78265

			Doci	iment Page 50 c	of 52
Fi	ll in this inf	ormation to	identify your case:		Check one box only as directed in this form and in Form 122A-1Supp:
De	btor 1	Susan First Name	M. Middle Name	Moore Last Name	1. There is no presumption of abuse.
De	btor 2	Thorramo	Wilder Hamo	Lastrano	
(Sp	oouse, if filing)		Middle Name	Last Name	2. The calculation to determine if a presumption of abuse applies will be made under Chapter Means Test Calculation (Official Form 122A-2
		nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS	3. The Means Test does not apply now because
	se number known)				of qualified military service but it could apply later.
					Check if this is an amended filing
Off	icial Form	122A-1			
Ch	apter 7 S	tatement c	of Your Current	Monthly Income	12
are e milit 122	exempted from ary service, c A-1Supp) with	n a presumption omplete and file this form.	n of abuse because yo	ou do not have primarily contion from Presumption of A	se number (if known). If you believe that you onsumer debts or because of qualifying Abuse Under § 707(b)(2) (Official Form
1.	What is your	marital and filir	ng status? Check one o	only.	
				y .	
			umn A, lines 2-11.	ill out both Columns A and D	7. lines 2.44
				ill out both Columns A and B	
	_			ou. You and your spouse a	
		_			t both Columns A and B, lines 2-11.
	dec	lare under penal	ty of perjury that you an	d your spouse are legally sep	-11; do not fill out Column B. By checking this box, you eparated under nonbankruptcy law that applies or that you g the Means Test requirements. 11 U.S.C. § 707(b)(7)(B)
	bankruptcy c August 31. If in the result.	ase. 11 U.S.C. the amount of your Do not include a	§ 101(10A). For exampour monthly income varing income amount more	ole, if you are filing on Septer led during the 6 months, add than once. For example, if	ed during the 6 full months before you file this ember 15, the 6-month period would be March 1 through d the income for all 6 months and divide the total by 6. File for both spouses own the same rental property, put the my line, write \$0 in the space. **Column A*** Column B***
					Debtor 1 Debtor 2 or non-filing spouse
2.		rages, salary, ti vroll deductions).	ps, bonuses, overtime	, and commissions	<u>\$0.00</u>
3.	Alimony and if Column B is		ayments. Do not includ	de payments from a spouse	\$0.00
4.	expenses of y regular contrib your depende	you or your depoutions from an units, parents, and	d roommates. Include re		\$0.00

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Case number (if known)

Debtor 1

Susan

Middle Name First Name Last Name

> Column A Debtor 1

Column B Debtor 2 or non-filing spouse

Net income from operating a business, profession, or farm

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$0.00		_		
Ordinary and necessary operating expenses	\$0.00		– Сору		
Net monthly income from a business profession, or farm	\$0.00		here ->	\$0.00	

Net income from rental and other real property

		Debtor 1	Debtor 2			
	Gross receipts (before all deductions)	\$0.00		_		
	Ordinary and necessary operating expenses	\$0.00		— Copy		
	Net monthly income from rental or other real property	\$0.00		here 👈	\$0.00	
7.	Interest, dividends, and royalties				\$0.00	

Unemployment compensation

Unemployment compensation	\$0.00
Do not enter the amount if you contend that the amount received was a	
benefit under the Social Security Act. Instead, list it here:	

\$0.00 For you..... For your spouse....._

Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

\$582.49

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a

separate page and put the total below.

Total amounts from separate pages, if any.

\$582.49 \$582.49

11. Calculate your total current monthly income. Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

Case 16-32000 Filed 10/06/16 Entered 10/06/16 16:13:57 Page 52 of 52 Case number (if known) Debtor 1 M. Susan Middle Name First Name Last Name Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: \$582.49 Χ 12 Multiply by 12 (the number of months in a year). \$6,989.88 12b. The result is your annual income for this part of the form. 12b. 13. Calculate the median family income that applies to you. Follow these steps: Illinois Fill in the state in which you live. Fill in the number of people in your household. 2 \$63,820.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. \square Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Susan M. Moore Signature of Debtor 2 Susan M. Moore, Debtor 1 Date 3/17/2016 MM / DD / YYYY MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Doc 1